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| SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT Address to: Commissioner for Patents Washington, D.C. 20231 | Attorney Docket | UCSF084CON |
| | First Named Inventor | Julius |
| | Application Number | 09/978,303 |
| | Filing Date | October 15, 2001 |
| | Group Art Unit | 1646 |
| | Examiner Name | To Be Assigned |
| | Title | NUCLEIC ACID SEQUENCES ENCODING CAPSAICIN RECEPTOR AND CAPSAICIN RECEPTOR-RELATED POLYPEPTIDES AND USES THEREOF |

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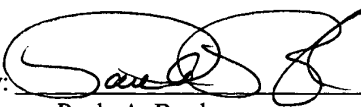
This is a Supplemental Information Disclosure Statement submitted for the Examiner's consideration. A Form PTO/SB/08A listing the references and International Search Report accompanies this paper. Applicants would appreciate the Examiner's initialing and returning the form to indicate that the references have been reviewed and made of record.

This Supplemental Information Disclosure Statement is not intended as a representation that a search has been made, that additional information material to the examination of this application does not exist, or that any one of the above references constitutes prior art to the present application within the meaning of 35 U.S.C. ' 102.

As applicants have not yet received a first Action on the merits, no fee is believed to be required for filing this Disclosure Statement. If, however, the PTO finds that for some reason a fee is due, our Deposit Account No. 50-0815 may be charged therefor.

Respectfully submitted,
BOZICEVIC, FIELD & FRANCIS LLP

Date: April 1, 2002

By: 
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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 09/978,303 |
| | | Filing Date | October 15, 2001 |
| | | First Named Inventor | JULIUS, DAVID J. |
| | | Group Art Unit | 1646 |
| | | Examiner Name | To Be Assigned |
| Total Number of Pages in This Submission | 4 + 12 cited references | Attorney Docket Number | UCSF084CON |
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| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) PTO/SB/08A (2 pgs.) 2) 11 Cited References 3) Return Postcard | |
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| Remarks | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
| Firm or Individual Name | PAULA A. BORDEN, Reg. No. 42,344 | | |
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